

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1996

Application or Docket Number

08/849543

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	27 minus 20 = *	
INDEPENDENT CLAIMS	minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	FEE
	385.00
x\$11=	22
x40=	
+130=	
TOTAL	517

OR

OR

OR

OR

OR

RATE	FEE
	770.00
x\$22=	
x80=	
+260=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*		Minus	**
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
x\$11=	
x40=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x\$22=	
x80=	
+260=	
TOTAL ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	22	Minus	** 22
Independent	*	1	Minus	*** 3	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
x\$11=	
x40=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x\$22=	
x80=	
+260=	
TOTAL ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	21	Minus	** 22
Independent	*	2	Minus	*** 3	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
x\$11=	
x40=	
+130=	
TOTAL ADDIT. FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x\$22=	
x80=	
+260=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: _____		2 Serial/Patent # <u>08/849513</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/>	Filing <u>961</u>	<u>1</u>	<u>10 JUN 97</u>	<u>\$4.55</u>
<input checked="" type="checkbox"/>	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
7 TOTAL AMOUNT OF REFUND			\$ <u>4.55</u>	
8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check		
<input checked="" type="checkbox"/>	Overpayment	Credit Deposit A/C #:		
<input checked="" type="checkbox"/>	Duplicate Payment	9 <u>16--0835</u>		
	No Fee Due (Explanation):			
<u>SMALL Entity</u> <u>WR FEE FEE Code</u>				
11 REFUND REQUESTED BY: <u>V. WALLACE</u>				
TYPED/PRINTED NAME:		TITLE: <u>POJ</u>		
SIGNATURE: <u>Nonda Wallace</u>		PHONE: <u>305 5736</u>		
OFFICE:				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: